Identifying Barriers to Equitable Access to Higher Education for Adolescent and Young Adult Cancer Survivors: An Exploratory Study Kathy Ruble, PhD Lisa Carey, EdD

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Background

Childhood cancer and treatment are known to impact cognition, often resulting in developmental disabilities such as ADHD, learning disabilities, and intellectual disability. Equitable access to quality education is a social determinant of health. Survivors often require academic accommodations (via special education / Section 504 plan) to access quality education, but struggle to obtain these supports due to communication gaps between medical and school teams.

This mixed-methods study explored cancer survivors' transition experience from high school to higher education. The study is an extension of a patientcentered quality improvement project focused on improving equitable access to education for childhood cancer survivors by disseminating relevant evidence to provider and parent stakeholders to improve the quality of patient care (PCORI EADI-14100).

Methods

An exploratory mixed-methods survey was disseminated via social media, in partnership with relevant cancer foundations, and via ads in clinics in three mid-Atlantic centers. Inclusion criteria required that participants 1) live in the US, 2) be \geq 18 years of age, and 3) have a cancer diagnosis prior to age 25.

Survey items were developed through in-depth literature review, including addressing post-secondary outcomes, higher education, access to and use of academic accommodations, degree of difficulty in attending higher education, and presence of cancer late effects. The survey included two qualitative items which asked participants "What was helpful for you to succeed in college and/or what do you think would have been helpful for you during this period?" and "How did your cancer diagnosis/ treatment impact your time in college (for example your learning, classes or success)?"

Quantitative data were analyzed using descriptive and inferential statistics. Qualitative data were analyzed using descriptive in-vivo codes and pattern coding to generate category labels. Finally, quantitative and qualitative data were converged.

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Results

 Participants (n=47; Mean age=23.1 years) fron 	n
14 states completed the survey (see Table 1).	
• 07.70/ reported a desire to attend higher	

- 97.7% reported a desire to attend higher education, with 81% attending some college and 44% not completing their degree due to challenges related to cancer and late effects of treatment (see Table 2).
- 17% of participants indicated that transitioning to higher education was too difficult due to cancer.
- Only 44.7% of participants received academic accommodations in college (see Table 3).

Qualitatively, participants reported specific barriers:

- lack of understanding by higher education faculty and staff
- lack of support from medical providers
- resulting in a large impact on academic success and quality of life

Discussion

- Prior evidence shows that accessing meaningful accommodations in higher education is difficult for students with disabilities.
- This exploratory study suggests cancer survivors receive inadequate supports to successfully navigate higher education, due in part to the siloed nature of healthcare and education.
- Qualitatively, survivors lacking supports were often forced to drop/retake classes or drop out, causing significant economic strain and negatively impacting educational attainment—a critical social determinant of health.
- Future interdisciplinary research examining barriers to higher education transition and access to disability accommodations is warranted, with a close look at the intersection between medical care and higher education supports.
- Findings highlight potential policy and practice changes to better support adolescents and young adults with cancer and other chronic illnesses.

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TABLE 1 DEM	OGRAPHICS	TABLE 2 CANCER IMPACTS ON HIGHER EDUCATION		
	N (%)	College plans after high school	N (%)	
Age at Diagnosis Childhood (<15 years) Adolescence (15-18 years) Young adult (>18 years)	13.7 years (SD=5.6) 21 (44.7%) 16 (34%) 10 (21.3%)	Cancer made it too hard Enrolled in college Path if not attending college Trade school/internship	8 (17%) 38 (80.9%) 1 (11.1%)	
Current Age Years Since Diagnosis	23.1 years (SD=4.4) 9.4 years (SD=7.4)	Joined workforce Home/unemployed	2 (22.2%) 6 (66.6%)	
Race White Black Asian Multiracial American/Alaskan Native Other	35 (74.5%) 4 (8.5%) 3 (6.4%) 2 (4.3%) 1 (2.1%) 1 (2.1%)	Highest degree earned Associate degree Bachelor's degree Graduate degree Uncompleted degree	3 (7.7%) 14 (35.9%) 5 (12.8%) 17 (44%)	
Declined answer	1 (2.1%)	Difficulty Rating (0-100 scale)	M (SD)	
Ethnicity Hispanic Non-Hispanic	5 (10.6%) 42 (89.4%)	Having cancer made college difficult Cognitive late effects made college difficult	59.4 (27) 67.7 (27.5)	
Gender Male Female	9 (19.2%) 38 (89.4%)			
Have late effects of cancer/treatment	40 (85%)			

TABLE 3Use of high school and collegeacademic supports by diagnosis age		Age at Diagnosis				
		Childhood N (%)	Adolescence N (%)	Young Adult N (%)	Total	
Received educational supports in high school	YES	14 (67%)	8 (50%)	2 (20%)	24 (51.1%)	
	NO	7 (33%)	8 (50%)	8 (80%)	23 (48.9%)	
Received educational supports in college	YES	10 (59%)	4 (33%)	7 (78%)	21 (55.3%)	
	NO	7 (41%)	8 (67%)	2 (22%)	17 (44.7%)	

FIGURE 1 QUALITATIVE DATA CATEGORIES				
	MENTAL HEALTH CONCERNS			
È	PHYSICAL IMPACTS / LATE EFFECTS			
E Constanting	NEUROCOGNITIVE IMPACTS / LATE EFFECTS			
	ALTERED COLLEGE COMPLETION TIMELINES			
	LACK OF TRANSITION SUPPORT FROM HIGH SCHOOL STAFF			
	EXPERIENCES WITH ACCOMMODATIONS			
	ROLE OF HIGHER ED FACULTY/ STAFF IN COLLEGE EXPERIENCE			

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